HEARING AID DISPENSER CONTINUING EDUCATION FORM

INSTRUCTIONS FOR COMPLETING AND SUBMITTING HEARING AID DISPENSER **CONTINUING EDUCATION FORM**

Complete items in the s	pace provided.	For Item #3.	(Category)	state the co	de from the	follo	owing !	list.

Categories 1 - Procedures in selection and fitting of hearing aids

- 2 Pre-and post-fitting management of clients
 - 3 Instrument circuitry and acoustic performance data
 - 4 Earmold design and modification to improve client performance
 - 5 Audiometric equipment or testing techniques
 - 6 Auditory rehabilitation
 - 7 Ethics
 - 8 Federal and state statutes or rules
 - 9 Assistive listening devices
- 2. If coursework complies with pre-approved provisions of R9-16-309(B) or (C), complete 1,2,3,7 and 8.
- 3. If coursework does not comply with pre-approved provisions, complete this form in its entirety.

	artment. Your renewal application is not o	-					j
1.	Name:		License #		License	Expiration:	
	Name of Business:						
	Business Address:						
	City:	State:		Zip Code	e:		
2.	Program Sponsor:						
	Location:						
	City:	State:		Zip Cod	e:		
3.	Course(s) Attended:			# of CEU	s	Category	

4.	Course(s) Content:		
5.	Educational Objective:		
			<u>, </u>
6.	Instructor(s) Education, Training and Experience:		
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7.	Total Number of CEUs:		
8.	I certify under penalty of perjury that I attended all form is complete and accurate.	CE courses as listed an	d that all information on this CE
	101 III is complete una accurate.		
		**	**
	Dispenser's Signature	License #	Date
relate level o CE co	ccordance with A.A.C. R9-16-309, for course work to be to the practice of fitting and dispensing hearing aids and of knowledge as it relates to fitting and dispensing hear course work which is substantially the same in content to be ding year.	and the educational objearing aids. The Director	ective shall exceed an introductor r shall not give a dispenser credit f
	DO NOT WRITE IN THIS A	REA - OFFICE USE O	NLY
# of	of CEU Credits Approved	Denied	Resubmit more information

N:Forms/HADCEU